10/10/1682

									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO															
Effective October 1, 2003									55-29						
_		CLAIMS A		SMALL ENTITY				OTHER	I TH	W					
(Column 1) (Column 2)										ב ב	OR	SMALL	_		
T	OTAL CLAIMS	•	24					RATE FE		FEE	]	RATE	F	EE	
P	DR .		MUMBER FILED		MUMBER EXTRA			BASIC F	Œ	85.00	OR	OR BASIC FEE		0.00	
T	OTAL CHARGE	ABLE CLAIMS	24 minus 20=		-4			XS 9:		36_		X\$18=	C\$18=		
INDEPENDENT CLAIMS			2 minus 3 =		•			X43= '			OR	X86=			
MI	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=			OR	+290=	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							İ	TOTAL 421		ОЯ	TOTAL	一			
( CLAIMS AS AMENDED - PART II									Ų		<i>.</i>	OTHER	THE	W	
f	16/14	(Column 1)		(Cotur		(Column 3)		SMAL	L EN	TITY	OR	SMALL	ENTITY		
A F		REMAINING AFTER AMENDMENT		HIGH HUMI PRIEVIC PAID	BER	PRESENT EXTRA		RATE	ÍΠ	ONAL FEE		RATE	TIO	军军	
<b>AMENDMENT A</b>	Total	. 23	Minus ·		4	•		X\$ 9-	7		OR	X\$18=			
	Independent	· A.	Minus .	***	3	•		X43=	十	T	OR	X86-			
	FIRST PRESENTATION OF MULTIPLE DEPEN		PÈNDENT	ENT CLAIM				1	1		+290=				
								+145=	_1_		OR	TOTAL	_		
								NOON, FE			OR	ADDIT. PEE	<u> </u>	+	
_		(Column 1)		(Colum		(Column 3)			_						
AMENDMENT B	3-219	REMAINING		NUMB PREVIOU PAID F		PRESENT EXTRA		RATE	TI	ADDI- TIONAL FEE		RATE	TIO	DI- NAL EE	
	Total	. 23	Minus	- 6	24	- /		X\$ 9=	Ţ.		OR	X\$18=			
	Independent	· ス	Minus	•••	3	• /		X43-	T		OR	X86=	7		
_	FIRST PRESE	NTATION OF MA	LTIPLE DE	ENDENT	CLAIM	<u></u>	'	+145=		/	OR.	+290=	7		
		-	YOTA		1	OR	YOTAL ADDIT, FEE	$I_{-}$							
		•			•		<b>-</b> ,	ι.							
	•	(Cotumn 1) CLAIMS REMADUNG	•	(Colum HIGHL NUME	ST	(Cotumn 3)		•	IA	DDI-	7		ĀĐ	늄	
	12-9-05	AFTER AMERICANSVIT		PREVIO PAID F	USLY	EXTRA		RATE		TIONAL FEE		RATE	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	NAL E	
AMENDMEN	Total .	A 1	Minus	<b>.</b> 2		- 1		X\$ 9=	T	- ,	OR	X\$18=			
	Independent	$\cdot$	Minus	•••	7	•	j	X43=	1	7.	OR	X86-/			
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						<b> </b>		十	T		/_	_		
••	مراجع والمراجع والأوا	na t le lace dice S			شدر بدا ۱۹۴	uma 3 .	L	+145=	1_		OR	+250=			
* If the value of the column 1 is less than the entry in column 2, write "O" in column 3.  ** If the "Highest Number Providesty Paid For" IN THIS SPACE is less than 20, enter "20."  *** The "Replact Number Providesty Paid For" IN THIS SPACE is less than 3, enter "3."  **** The "Replact Number Providesty Paid For" IN THIS SPACE is less than 3, enter "3."															
1	The Tighest Russ	Ser Previously Paid	For (Total or	independe	ut) is the	highest number	tout	a to do a	<del>bbrob</del>	tatè bas	in con		•	j	